UNITED STATES BANKRUPTCY COURT	
EASTERN DISTRICT OF NEW YORK	
X	
In re	
	Case No. 19-78530
	Case No. 19-76550
Marina Sferlazza	
	Chapter 7
Dahtar(a)	Chapter /
Debtor(s).	
X	

AFFIRMATION PURSUANT TO LOCAL RULE 1007-1(b)

- 1, I, John Weber, Esq., is the attorney for the above captioned Chapter 7 Debtor.
- 2. On December 16, 2019, the Debtor filed a petition under Chapter 7 of the Bankruptcy without all the required Forms, Schedules and Statements.
- 3. I am now submitting the remaining Forms, Schedules and Statements.
- 4. The Schedules filed herewith reflect no additions or corrections to, or deletions from, the list of creditors which accompanied the petition.

Dated: Babylon NY

December 19, 2019

s/ John Weber

John Weber, Esq. Attorney for the Debtor 400 West Main Street, Suite 206 Babylon NY 11702 (631) 321-6065

1 Marina Sferlazza			
	Middle Name Last Name		
2 First Name !	/liddle Name Last Name		
States Bankruptcy Court for the: EAST	ERN DISTRICT OF NEW YORK		
umber 8-19-78530			
		_	eck if this is an ended filing
tial Form 106Sum	inhibition and Contain Obstical Information	_	
			12/15
ation. Fill out all of your schedules first;	then complete the information on this form. If you are filing ame		
iginal forms, you must fill out a new <i>Su</i>	mmary and check the box at the top of this page.		
Summarize Your Assets			
			r assets e of what you own
		\$	580,433.00
o. Copy line 62, Total personal property, fro	om Schedule A/B	\$_	6,210.00
c. Copy line 63, Total of all property on Sch	nedule A/B	. \$_	586,643.0
Summarize Your Liabilities			
			r liabilities unt you owe
		\$_	853,283.00
		\$	0.00
o. Copy the total claims from Part 2 (nonp	riority unsecured claims) from line 6j of Schedule E/F	\$_	9,127.00
	Your total liabilit	es \$	862,410.00
Summarize Your Income and Expen	ses		
		. \$_	3,240.00
chedule J: Your Expenses (Official Form 1	06J) of <i>Schedule J</i>	\$	3,235.00
	States Bankruptcy Court for the: EAST umber 8-19-78530 Eal Form 106Sum mary of Your Assets and Lomplete and accurate as possible. If two tion. Fill out all of your schedules first; iginal forms, you must fill out a new Summarize Your Assets Chedule A/B: Property (Official Form 106 a. Copy line 55, Total real estate, from Schoo. Copy line 62, Total personal property, from the composition of the total you listed in Column A, A chedule E/F: Creditors Who Have Unsecute a. Copy the total you listed in Column A, A chedule E/F: Creditors Who Have Unsecute a. Copy the total claims from Part 1 (priority a. Copy the total claims from Part 1 (priority a. Copy the total claims from Part 2 (nonperty to t	States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK Sammary of Your Assets and Liabilities and Certain Statistical Information	States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK Internation

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- Yes
- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1 Marina Sferlazza

Case number (if known) 8-19-78530

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,196.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clain	า
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill	in this info	ormation to ider	ntify y	your ca	se and thi	is filing):						
Deb	tor 1	Marina First Name	Sfe	rlazza	A Middle	Name		Last Name					
	tor 2 use, if filing)	First Name			Middle	Name		Last Name					
Unit	ed States I	Bankruptcy Cour	t for t	he: E	ASTERN I	DISTRI	CT OF NEW	YORK					
Cas	e number	8-19-78530)					_					Check if this is an amended filing
		orm 106 <i>F</i>											
<u>Sc</u>	hedu	le A/B:	<u> Pr</u>	ope	rty								12/15
think infori	it fits best. nation. If m er every qu	Be as complete ore space is need estion.	and ad led, at	ccurate a ttach a s	as possible eparate sh	e. If two eet to th	married peopl nis form. On th	an asset fits in mo e are filing togeth e top of any addi wn or Have an Into	er, both are o tional pages,	equally respor	sible for sup	oplyii	
1. D c	you own o	r have any legal o	or equ	ıitable in	terest in ar	ny resid	ence, building	, land, or similar լ	property?				
	No. Go to F	art 2.											
	Yes. Where	e is the property?											
1.1						What	is the property	y? Check all that app	ıly				
		thgate Cres					Single-family	home					r exemptions. Put
	Street addres	ss, il avallable, di dirie	i desci	приоп		Duplex or multi-unit building Condominium or cooperative			the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.				
				11747	7_000		Manufactured	or mobile home				_	
	Melvil			0			Land			entire proper	rty?		rrent value of the tion you own?
	City	St	ate	ZIP	Code		Investment pr Timeshare	operty			133.00 nature of yo	our o	\$580,433.00 wnership interest
						□ Who	Other has an interes	t in the property?	Check one	(such as fee a life estate)		ncy l	by the entireties, or
	Suffoll	7					Debtor 1 only			Tenant b	y the Er	nti ——	rety
	County	7					Debtor 2 only Debtor 1 and	Debtor 2 only		Ob sale ii	: 4b:		.
								of the debtors and a cou wish to add altion number:		(see instru	,	nuni	ту ргорепту
								Foreclosure	€				
			•	•				from Part 1, inc	• •				580,433.00
	pages you	have attached	tor P	art 1. W	Vrite that i	numbe	r here			=>	·		
Part	2: Describ	e Your Vehicles											
Do y	ou own, le	ase, or have le	gal o	r equita	ble intere	est in a	ny vehicles, v	whether they ar	re registere	d or not? Inc	lude any vel	hicle	s you own that
		•			·			xecutory Contra	cts and Une	xpired Leases	S.		
		trucks, tractors	, spo	ort utilit	y vehicles	s, moto	rcycles						
	No												
Ц	Yes												

Debtor 1	Marina Sfe	erlazza Case number	(if known) 8-19-78530
		otor homes, ATVs and other recreational vehicles, other vehicles, and accesson, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
■ No			
☐ Yes			
		f the portion you own for all of your entries from Part 2, including any entries from Part 2. Write that number here	
Part 3:	Describe Your Perso	onal and Household Items	
·	·	legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	chold goods and f ples: Major appliar	furnishings nces, furniture, linens, china, kitchenware	
■ Ye	s. Describe		
		Location: 32 Northgate Crescent, Melville NY 11747	\$3,500.00
□ No	ples: Televisions a	and radios; audio, video, stereo, and digital equipment; computers, printers, scanner phones, cameras, media players, games Location: 32 Northgate Crescent, Melville NY 11747	rs; music collections; electronic devices
Exam		d figurines; paintings, prints, or other artwork; books, pictures, or other art objects; st ions, memorabilia, collectibles	amp, coin, or baseball card collections;
Exam ■ No	musical instr	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, ski	s; canoes and kayaks; carpentry tools;
	s. Describe		
		es, shotguns, ammunition, and related equipment	
■ No □ Ye	s. Describe		
□ No		lothes, furs, leather coats, designer wear, shoes, accessories	
		Location: 32 Northgate Crescent, Melville NY 11747	\$2,000.00
■ No		ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watche	es, gems, gold, silver

De	btor 1 <u>Marina Sfe</u>	rlazza	Case number (if known)	8-19-78530
13.	Non-farm animals			
	Examples: Dogs, cats, b	oirds, horses		
	■ No			
	Yes. Describe			
	_ ' '	d household items you d	lid not already list, including any health aids you did not list	
	■ No			
	☐ Yes. Give specific info	ormation		
15			n Part 3, including any entries for pages you have attached	\$5,800.00
Pa	rt 4: Describe Your Financ	ial Δesets		
			in any of the following?	Current value of the
		•	·	portion you own?
				Do not deduct secured claims or exemptions.
	•			
16.	Cash Examples: Money you ha	ave in vour wallet, in vour	home, in a safe deposit box, and on hand when you file your petiti	ion
	■ No	,,	,	
	☐ Yes			
47	Democite of money			
17.	Deposits of money Examples: Checking, sa	avings, or other financial a	ccounts; certificates of deposit; shares in credit unions, brokerage	houses, and other similar
	institutions. If		nts with the same institution, list each.	
	□ No		Institution name.	
	Yes		Institution name:	
		47.4 61 11	Oth the sale	¢400.00
		17.1. Checking	Citibank	\$400.00
		17.2. Savings	Citibank	\$10.00
18.	Bonds, mutual funds, o	or publicly traded stocks	3	
			brokerage firms, money market accounts	
	■ No	lastitution on ion.		
	☐ Yes	Institution or issu	er name:	
19.		ock and interests in inco	rporated and unincorporated businesses, including an interes	st in an LLC, partnership, and
	joint venture			
	■ No			
	☐ Yes. Give specific info	Name of entity:		
		,	•	
	0		and the said and a said the between the	
20.			egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders,	
20.	Negotiable instruments i	include personal checks,	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	
	Negotiable instruments i Non-negotiable instrume ■ No	include personal checks, cents are those you cannot	cashiers' checks, promissory notes, and money orders.	
	Negotiable instruments i Non-negotiable instrume	include personal checks, ents are those you cannot rmation about them	cashiers' checks, promissory notes, and money orders.	
	Negotiable instruments i Non-negotiable instrume ■ No	include personal checks, cents are those you cannot	cashiers' checks, promissory notes, and money orders.	
	Negotiable instruments i Non-negotiable instrume ■ No □ Yes. Give specific infor Retirement or pension a	include personal checks, ents are those you cannot rmation about them Issuer name: accounts	cashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	
21.	Negotiable instruments in Non-negotiable instruments. Non-negotiable instruments. No □ Yes. Give specific information Retirement or pension and Examples: Interests in IF	include personal checks, ents are those you cannot rmation about them Issuer name: accounts	cashiers' checks, promissory notes, and money orders.	plans
21.	Negotiable instruments i Non-negotiable instrume No No Yes. Give specific infor Retirement or pension a Examples: Interests in IF	include personal checks, cents are those you cannot rmation about them Issuer name: accounts RA, ERISA, Keogh, 401(k	cashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	plans
21.	Negotiable instruments in Non-negotiable instruments. Non-negotiable instruments. No □ Yes. Give specific information Retirement or pension and Examples: Interests in IF	include personal checks, cents are those you cannot rmation about them Issuer name: accounts RA, ERISA, Keogh, 401(k	cashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	plans

De	ebtor 1	Marina	Sferlazza		Case number (if know	n) <u>8-19-78530</u>
22.	Your s	hare of all un			e service or use from a company , gas, water), telecommunications comp	panies, or others
	■ No		.,	Institution name	e or individual:	
	□ res.			moutation name	or marriada.	
23.	Annuiti ■ No	ies (A contra	ct for a periodic payment of m	oney to you, either for life	or for a number of years)	
	☐ Yes		Issuer name and description	n.		
24.	26 U.S.0		cation IRA, in an account in a (1), 529A(b), and 529(b)(1).	a qualified ABLE progra	m, or under a qualified state tuition	program.
	■ No □ Yes		Institution name and descrip	otion. Separately file the re	ecords of any interests.11 U.S.C. § 521	(c):
25.	Trusts, ■ No	, equitable o	r future interests in property	/ (other than anything lis	sted in line 1), and rights or powers e	exercisable for your benefit
		Give specific	c information about them			
26.			s, trademarks, trade secrets, domain names, websites, prod			
		Give specific	c information about them			
27.	Examp		es, and other general intang permits, exclusive licenses, co		ldings, liquor licenses, professional lice	enses
	■ No □ Yes.	Give specific	c information about them			
M	oney or	property ow	ed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	unds owed		ding whother you already	filed the returns and the tax years	
	□ 163.	Oive specific	miorination about them, inclu-	unig whether you already	med the returns and the tax years	
29.		support oles: Past due	e or lump sum alimony, spousa	al support, child support, r	maintenance, divorce settlement, prope	erty settlement
	☐ Yes.	Give specific	information			
	Examp _	oles: Unpaid	meone owes you wages, disability insurance pay ;; unpaid loans you made to so		, sick pay, vacation pay, workers' com	pensation, Social Security
	■ No □ Yes.	Give specific	c information			
31.	Examp		nce policies disability, or life insurance; hea	alth savings account (HSA	x); credit, homeowner's, or renter's insu	irance
	■ No □ Yes	Name the inc	surance company of each police	ry and list its value		
	- 103.	Name the ma	Company name:	by and not its value.	Beneficiary:	Surrender or refund value:
32.	If you a	terest in pro are the benef one has died.	perty that is due you from se ficiary of a living trust, expect p	omeone who has died proceeds from a life insura	ance policy, or are currently entitled to r	eceive property because
	☐ Yes.	Give specific	c information			

Deb	otor1 Marina Sferlazza		Case number (if known)	-19-78530
_	Claims against third parties, whether or not you Examples: Accidents, employment disputes, insura		and for payment	
	No Yes. Describe each claim			
	Other contingent and unliquidated claims of eve	ry nature, including counterclaims	of the debtor and rights to s	et off claims
	No Yes. Describe each claim			
	Any financial assets you did not already list			
	No Yes. Give specific information			
36.	Add the dollar value of all of your entries from for Part 4. Write that number here			\$410.00
Part	5: Describe Any Business-Related Property You Own	or Have an Interest In. List any real esta	ate in Part 1.	
	Oo you own or have any legal or equitable interest in ar	y business-related property?		
	Yes. Go to line 38.			
	<u></u>			
Part	6: Describe Any Farm- and Commercial Fishing-Rela If you own or have an interest in farmland, list it in Par		st In.	
	Do you own or have any legal or equitable intere	est in any farm- or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Inc	terest in That You Did Not List Above		
	Do you have other property of any kind you did in Examples: Season tickets, country club membershit No			
	Yes. Give specific information			
	Automobile Leas	se for a 2014 Audi		\$0.00
54.	Add the dollar value of all of your entries from	Part 7. Write that number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$580,433.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, lin	e 15 \$5,800.00		
58.	Part 4: Total financial assets, line 36	\$410.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property	, line 52 \$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$6,210.00	Copy personal property total	\$6,210.00
63.	Total of all property on Schedule A/B. Add line	55 + line 62		\$586,643.00

Fill in this infor	mation to identify your	case:					
Debtor 1 Marina Sferlazza							
Debtor 2	First Name	Middle Name	Last Name				
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK				
Case number	8-19-78530						
(if known)							

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
32 Northgate Crescent Melville, NY 11747 Suffolk County Property in Foreclosure Line from Schedule A/B: 1.1	\$580,433.00	\$1,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(1)
Location: 32 Northgate Crescent, Melville NY 11747 Line from Schedule A/B: 6.1	\$3,500.00	\$3,500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Location: 32 Northgate Crescent, Melville NY 11747 Line from Schedule A/B: 7.1	\$300.00	\$300.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Location: 32 Northgate Crescent, Melville NY 11747 Line from Schedule A/B: 11.1	\$2,000.00	\$2,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Checking: Citibank Line from <i>Schedule A/B</i> : 17.1	\$400.00	\$400.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)

ebtor '	Marina Sferlazza		Case number (if known)	8-19-78530	
	of description of the property and line on needule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Check only one box for each exemption.		
	vings: Citibank e from <i>Schedule A/B</i>: 17. 2	\$10.00	\$10.00	11 U.S.C. § 522(d)(5)	
			☐ 100% of fair market value, up to any applicable statutory limit		
	you claiming a homestead exemption				
(30	bject to adjustment on 4/01/22 and every and e	3 years after that for ca	ses filed on or after the date of adjustmer	t.)	

Filli	n this inform	nation to identify you	ır case:					
Deb	tor 1	Marina Sferl	azza					
		First Name	Middle Name Las	t Name		•		
Debi (Spou	tor 2 ise if, filing)	First Name	Middle Name Las:	st Name				
Unite	ed States Bar	nkruptcy Court for the	EASTERN DISTRICT OF NEW YOR	RK				
	_	3-19-78530						
(if kno	own)							if this is an
							amend	ed filing
Offi	cial Form	106D						
Scl	hedule	D: Creditors	Who Have Claims Se	cure	d by Propert	v		12/15
					<u> </u>	<u> </u>		
s nee			If two married people are filing together, bo out, number the entries, and attach it to thi					
1. Do	any creditors	have claims secured by	y your property?					
I	☐ No. Check	this box and submit t	his form to the court with your other sche	edules. Y	ou have nothing else t	o report on this	form.	
ı	Yes. Fill in	all of the information	below.					
Part	1: List Al	I Secured Claims						
2. Lis	st all secured of	claims. If a creditor has	more than one secured claim, list the creditor s	separately	, Column A	Column B		Column C
for ea	ach claim. If me	ore than one creditor has	s a particular claim, list the other creditors in Pa cal order according to the creditor's name.		Amount of claim Do not deduct the	Value of colla that supports		Unsecured portion
	, ,	· ·	J		value of collateral.	claim		If any
2.1	BOD of N		Describe the property that secures the cl	laim:	\$45,000.00	\$551,31	9.00	\$0.00
	Creditor's Name	•	32 Northgate Crescent Melville, NY 11747 Suffo.	1 12				
			County	T.V.				
	c/o		Property in Foreclosure.					
	- , -	r/Buchell	Subject to Liens in excess of \$800,000.00	S				
	666 Old	Country Road	As of the date you file, the claim is: Check	all that				
	Garden C	ity, NY	apply.					
	11530		Contingent					
	Number, Street,	City, State & Zip Code	Unliquidated					
\A/b o	owee the de	bt? Check one.	Disputed					
_		bir Check one.	Nature of lien. Check all that apply.					
	ebtor 1 only		An agreement you made (such as mortg	age or sec	cured			
	ebtor 2 only bebtor 1 and De	htor 2 only	car loan) Statutory lien (such as tax lien, mechanic	c's lion)				
_		•	☐ Statutory lien (such as tax lien, mechanic	cs iieli)				
_		ne debtors and another	_					
	community del	aim relates to a bt	☐ Other (including a right to offset)					

Date debt was incurred _

Last 4 digits of account number

Debtor 1 Marina Sferlazza		Case number (if known)	8-19-78530	
First Name Middle N	ame Last Name			
2.2 NYS Dept of Tax &	Describe the property that secures the claim:	\$7 , 792.00	\$551 , 319.00	\$0.00
Finance Creditor's Name	32 Northgate Crescent	1	4001/013.00	
	Melville, NY 11747 Suffolk			
	County in Faraglagues			
	Property in Foreclosure. Subject to Liens in excess			
	of \$800,000.00			
POB 5300	As of the date you file, the claim is: Check all that apply.			
Albany, NY 12205	☐ Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or car loan)	secured		
Debtor 2 only	_			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number			
2.3 Selene Finance	Describe the property that secures the claim:	\$800,491.00	\$551,319.00	\$301,964.0
Creditor's Name	32 Northgate Crescent	1		
	Melville, NY 11747 Suffolk			
	County			
	Property in Foreclosure. Subject to Liens in excess			
9990 Richmond	of \$800,000.00			
Suite 400 South	As of the date you file, the claim is: Check all that apply.			
Houston, TX 77242	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or	secured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
_	☐ Judgment lien from a lawsuit			
■ At least one of the debtors and another ☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt	— Other (including a right to onset)			
Data daht was incurred	Last 4 digits of account number 0.2.6	1		
Date debt was incurred	Last 4 digits of account number 036	<u> </u>		
Add the dollar value of your entries in C	olumn A on this page. Write that number here:	\$853,283	.00	
If this is the last page of your form, add		\$853,283		
Write that number here:		7033,203	.00	
Part 2: List Others to Be Notified for	r a Debt That You Already Listed			
	e notified about your bankruptcy for a debt that y	ou already listed in Part 1. F	For example, if a collec	tion agency is
trying to collect from you for a debt you o	we to someone else, list the creditor in Part 1, and	d then list the collection age	ency here. Similarly, if	ou have more
debts in Part 1, do not fill out or submit the	t you listed in Part 1, list the additional creditors hais page.	nere. If you do not have add	itional persons to be no	otified for any
, ,	, ,			
Name, Number, Street, City, State &	Zip Code On v	vhich line in Part 1 did you ent	ter the creditor? 2.3	<u> </u>
Woods Oviatt Gilman 700 Crossroads Buildin	na Last	4 digits of account number		
2 State Street	-9 LdSt	. aigns or account number _		
Rochester, NY 14614				

Official Form 106D

Fill in this in	formation to identify your	case:				
Debtor 1	Marina Sferlaz	za				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United Otata	Dealementer Count for the	EACTEDNI DICTRICT				
United States	s Bankruptcy Court for the:	EASTERN DISTRICT (DF NEW YORK			
Case numbe	r <u>8-19-78530</u>					
(if known)					_	Check if this is an
					i	amended filing
Official F	orm 106E/F					
Schedule	e E/F: Creditors W	ho Have Unsec	ured Claims			12/15
Schedule G: E: Schedule D: Ci left. Attach the name and case	xecutory Contracts and Unexpreditors Who Have Claims Sec Continuation Page to this page number (if known).	ired Leases (Official Form ured by Property. If more s le. If you have no information	106G). Do not include : pace is needed, copy t	contracts on Schedule A/B: Pro any creditors with partially sec the Part you need, fill it out, nur do not file that Part. On the top	ured claim mber the e	s that are listed in ntries in the boxes on the
	st All of Your PRIORITY Ur editors have priority unsecure					
No. Go		u ciaiiiis agailist you :				
_	10 Part 2.					
☐ Yes.						
Part 2: Li	st All of Your NONPRIORIT	Y Unsecured Claims				
3. Do any cr	editors have nonpriority unsec	cured claims against you?				
☐ No. Yo	u have nothing to report in this p	art. Submit this form to the co	ourt with your other sche	edules.		
Yes.						
4. List all of unsecured	claim, list the creditor separatel	y for each claim. For each cla	im listed, identify what t	holds each claim. If a creditor hype of claim it is. Do not list claim three nonpriority unsecured clain	s already ir	cluded in Part 1. If more
						Total claim
4.1 Cap	1/1&t	Last 4 digit	s of account number	6734		\$279.00
Nonp	riority Creditor's Name			Opened 12/16 Last		
	Box 30253	When was	the debt incurred?	Active 11/05/19		
	t Lake City, UT 841 per Street City State Zip Code		ate you file, the claim i	s: Check all that apply		_
	incurred the debt? Check one.	As of the u	ate you file, the claim i	s. Check all that apply		
_	ebtor 1 only	☐ Continge	ant			
	ebtor 2 only					
	ebtor 1 and Debtor 2 only	☐ Disputed				
	least one of the debtors and an	_ '	, NPRIORITY unsecured	d claim:		
	heck if this claim is for a com		loans			
debt	claim subject to offset?	<u> </u>		ration agreement or divorce that	you did not	
■ No	0	☐ Debts to	pension or profit-sharin	g plans, and other similar debts		
□ Ye	es	Other. S	pecify Charge Ac	count		

Official Form 106 E/F

Cap1 / Sa ks Various	Debtor	1 Marina Sferlazza		Case number (if known) 8-19-7853	0
3455 Hay 80 West 30203	4.2		Last 4 digits of account number	7832	\$89.00
Who incurred the debt? Check one: Debtor 1 anly Debtor 2 anly Debtor 2 anly Debtor 3 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Surface the claim subject to offset? No Debtor 1 and Debtor 2 only Debtor 3 and Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 and 5 an		3455 Hwy 80 West Jackson, MS 39209		Active 12/07/19	
Debtor 1 only			As of the date you file, the claim	is: Check all that apply	
Debtor 1 and Debtor 2 only Unliquidated Disputed		_	Пол		
Debtor 1 and Debtor 2 only		•			
At least one of the debtors and another Check if this claim is for a community dobt			_ `		
Check if this claim is for a community debt is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to Pension or profit-sharing plans, and other similar debts Debts to Pension or profit-sharing plans, and other similar debts Debts to Pension or profit-sharing plans, and other similar debts Debts to Pension or profit-sharing plans, and other similar debts Debts to Pension or profit-sharing plans, and other similar debts Debts to Pension or profit-sharing plans, and other similar debts Debts to Pension or Pensio		_	•	d claim:	
debt st the claim subject to offset? contingent c			☐ Student loans		
Chrysler Capital Last 4 digits of account number 1000 Unknown		debt		aration agreement or divorce that you did not	
Chrysler Capital Norpriority Creditor's Name Po Box 961212 Fort Worth, TX 76161 As of the date you file, the claim is: Check all that apply Contingent Debtor 1 only Debtor 2 only Disputed Type of NoNPRIORITY unsecured claim: Student loans Debtor 3 and potentials Debtor 3 and potentials Debtor 4 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts Southqate, MI 48195 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 only Debts to pension or profit-sharing plans, and other similar debts Debtor 1 only Debtor 1 onl		■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Nonpriority Creditor's Name Po Box 961212 Fort Worth, TX 76161 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only		Yes	Other. Specify Charge Ac	count	
Po Box 961212	4.3		Last 4 digits of account number	1000	Unknown
Who incurred the debt? Check one. □ Debtor 1 only □ Contingent □ Debtor 2 only □ Disputed □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt ls the claim subject to offset? □ No □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 street clirk sclaim is for a community □ Debtor 1 street clirk sclaim is for a community □ Debtor 1 street clirk sclaim is for a community □ Debtor 1 street clirk sclaim is for a community □ Debtor 1 street clirk sclaim is for a community □ Debtor 2 only □ Disputed □ Check if this claim is for a community □ Debtor 2 only □ Disputed □ Check if this claim is for a community debt ls the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Opened 10 / 18 As of the date you file, the claim is: Check all that apply □ Debtor 1 and Debtor 2 only □ Disputed □ Contingent □ Disputed □ Check if this claim is for a community debt ls the claim subject to offset? □ Check if this claim is for a community debt ls the claim subject to offset? □ Debtor 1 pension or profit-sharing plans, and other similar debts			When was the debt incurred?		
□ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Other. Specify Deficiency on a car Lease 4.4 Credence Resource Mana Nonpriority Creditor's Name Po Box 2300 Southgate, MI 48195 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Debtor 1 and Debtor 2 only □ Contingent □ Check if this claim is for a community debt Is the claim subject to offset? □ Debtor 1 and Debtor 2 only □ Disputed □ Debtor 1 and Debtor 2 only □ Disputed			As of the date you file, the claim	is: Check all that apply	
Debtor 2 only		_	_		
Debtor 1 and Debtor 2 only		_			
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Credence Resource Mana Nonpriority Creditor's Name Po Box 2300 Southgate, MI 48195 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 the debt of this claim is for a community debt Debtor 4 the claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Type of NONPRIORITY unsecured claim: Debts to pension or profit-sharing plans, and other similar debts			•		
Check if this claim is for a community debt Is the claim subject to offset? No Credence Resource Mana Nonpriority Creditor's Name Po Box 2300 Southgate, MI 48195 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? No Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 only Debtor 2 only Debtor 3 or profit-sharing plans, and other similar debts		_	· · · · · · · · · · · · · · · · · · ·	d claim:	
Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		_	<u></u> '	a ciaiii.	
Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Deficiency on a car Lease 44 Credence Resource Mana Nonpriority Creditor's Name Po Box 2300 Southgate, MI 48195 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Credence Resource Mana Last 4 digits of account number 8765 \$1,317.00 When was the debt incurred? Opened 10/18 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising plans, and other similar debts			_	ration agreement or divorce that you did not	
□ Yes □ Other. Specify □ Deficiency on a car Lease □ St., 317.00 At Credence Resource Mana Last 4 digits of account number 8765 \$1,317.00 Nonpriority Creditor's Name Po Box 2300 Southgate, MI 48195 Number Street City State Zip Code When was the debt incurred? Opened 10/18 Opened 10/18		Is the claim subject to offset?			
As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Debtor 1 onfset Debtor 2 only Debtor 3 of the debtors and another Check if this claim is for a community debt Debtor 3 offset? Debtor 4 offset Debtor 5 offset? Debtor 6 offset? Debtor 7 offset Debtor 8 offset Debtor 9 offset Debtor		No	Debts to pension or profit-sharing	g plans, and other similar debts	
Nonpriority Creditor's Name Po Box 2300 Southgate, MI 48195 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? Opened 10/18 As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Check all that apply When was the debt incurred? Opened 10/18 As of the date you file, the claim is: Check all that apply Check all that apply Check all that apply Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		Yes	■ Other. Specify Deficience	cy on a car Lease	
When was the debt incurred? Opened 10/18 Southgate, MI 48195 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? Opened 10/18 As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	4.4		Last 4 digits of account number	8765	\$1,317.00
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts			When was the debt incurred?	Opened 10/18	
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Contingent □ Unliquidated □ Disputed □ Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			As of the date you file, the claim	is: Check all that apply	
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		Who incurred the debt? Check one.	• ,	.,,	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		■ Debtor 1 only	☐ Contingent		
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		Debtor 2 only	☐ Unliquidated		
□ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		☐ Debtor 1 and Debtor 2 only	!		
debt I Obligations arising out of a separation agreement or divorce that you did not report as priority claims No Debts to pension or profit-sharing plans, and other similar debts		☐ At least one of the debtors and another		d claim:	
Is the claim subject to offset? report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		•			
■ No Debts to pension or profit-sharing plans, and other similar debts				iration agreement or divorce that you did not	
☐ Yes ☐ Other Specify Collection Attorney Att Mobility			<u></u>	g plans, and other similar debts	
		Yes	■ Other. Specify Collectic	on Attorney Att Mobility	

Debto	1 Marina Sferlazza		Case number (if known)	8-19-78530	
4.5	Credit Coll	Last 4 digits of account number	3053		\$363.00
	Nonpriority Creditor's Name Po Box 607 Norwood, MA 02062	When was the debt incurred?	Opened 12/29/16		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar del	bts	
	Yes	Other. Specify 06 Progre	essive		
4.6	Credit One Bank Na Nonpriority Creditor's Name	Last 4 digits of account number	3151		\$1,250.00
	Po Box 98872 Las Vegas, NV 89193	When was the debt incurred?	Opened 08/17 La Active 11/08/19	ast 	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar del	ots	
	Yes	■ Other Specify Credit Ca	ard		
4.7	Credit One Bank Na Nonpriority Creditor's Name	Last 4 digits of account number	3119		\$1,232.00
	Po Box 98872 Las Vegas, NV 89193	When was the debt incurred?	Opened 05/16 La Active 12/02/19	ast	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar del	bts	
	Yes	■ Other. Specify Credit Ca	ard		

Debto	r1 Marina Sferlazza		Case number (if known)	8-19-78530	
4.8	Jefferson Capital Syst	Last 4 digits of account number	7003		\$684.00
	Nonpriority Creditor's Name 16 Mcleland Rd Spint Cloud MN 56303	When was the debt incurred?	Opened 03/17		
	Saint Cloud, MN 56303 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-shari	ng plans, and other similar de	bts	
	□Yes	Other Specify Factoring Wireless	g Company Account	Verizon	
4.9	National Grid	Last 4 digits of account number			Unknown
	Nonpriority Creditor's Name POB 11741 Newark, NJ 07101	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-shari	ng plans, and other similar de	bts	
	Yes	■ Other. Specify Utility	Bill		
4.1	PSEGLI	Last 4 digits of account number			Unknown
0	Nonpriority Creditor's Name	Last 4 digits of account number			
	15 Park Dr Special Collections Melville, NY 11747	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-shari	ng plans, and other similar de	bts	
	Yes	■ Other Specify Utility	Bill		

Debtor 1	1 Marina	Sferlazza		Case num	ber (if known)	8-19-78530)
4.1							
1	Syncb/bp		Last 4 digits of account number	2325		_	\$1,215.00
	Nonpriority Cre	editor's Name		Onene	d 05/89 I	.aet	
	- , -	ox 965024 FL 32896	When was the debt incurred?	Active			
		t City State Zip Code	As of the date you file, the claim	is: Check a	ll that apply		
	_	the debt? Check one.					
	Debtor 1 or	nly	☐ Contingent				
	Debtor 2 or	nly	☐ Unliquidated				
	Debtor 1 ar	nd Debtor 2 only	☐ Disputed				
	☐ At least one	e of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if th	nis claim is for a community	☐ Student loans				
	debt Is the claim s	ubject to offset?	Obligations arising out of a separeport as priority claims	aration agre	ement or divorce	that you did not	
	■ No		Debts to pension or profit-sharir	ng plans, an	d other similar d	ebts	
	☐ Yes		■ Other. Specify Charge Ac				
	103		Other. Specify Charge The	COUNT			
4.1	The Burea	alle Inc	Last 4 digits of account number	5972			\$2,698.00
	Nonpriority Cre		Last 4 digits of account number			_	72,090.00
					d 01/15 I		
	650 Dunde	se Road ok, IL 60062	When was the debt incurred?	Active	e 3/23/15	<u> </u>	
		t City State Zip Code	As of the date you file, the claim	is: Check al	II that apply		
	Who incurred	the debt? Check one.					
	■ Debtor 1 or	nly	☐ Contingent				
	Debtor 2 or	nly	☐ Unliquidated				
	☐ Debtor 1 ar	nd Debtor 2 only	☐ Disputed				
		e of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	_	nis claim is for a community	☐ Student loans				
	debt	no olami lo for a community	☐ Obligations arising out of a sepa	aration agree	ement or divorce	that you did not	
	Is the claim s	ubject to offset?	report as priority claims				
	No		Debts to pension or profit-sharing	ng plans, an	d other similar d	ebts	
	☐ Yes			on Atto:	rney Capit	cal One	
Part 3:	List Other	rs to Be Notified About a Debt	That You Already Listed				
is tryin have m	ng to collect from	om you for a debt you owe to some	out your bankruptcy, for a debt that yeone else, list the original creditor in ou listed in Parts 1 or 2, list the add ubmit this page.	n Parts 1 or	${\bf 2}, {\bf then} \; {\bf list} \; {\bf the} \\$	collection agency l	nere. Similarly, if you
Part 4:	Add the A	Amounts for Each Type of Unse	ecured Claim				
	he amounts of f unsecured cl		s. This information is for statistical r	reporting pu	urposes only. 2	8 U.S.C. §159. Add	the amounts for each
					Total	l Claim	
	6a.	Domestic support obligations		6a.	\$	0.00	
Total claims							
from Par		•	_	6b.	\$	0.00	
	6c. 6d.	•	ury while you were intoxicated ured claims. Write that amount here.	6c. 6d.	\$ \$	0.00	
	ou.	. Silici. Add all other priority unsec	aroa olaimo. Wille tilat amount nele.	ou.	–	0.00	
	6e.	Total Priority. Add lines 6a throug	gh 6d.	6e.	\$	0.00	
		-		L			
		a.		24		l Claim	
Total	6f.	Student loans		6f.	\$	0.00	
claims							
from Par	r t 2 6g.	 Obligations arising out of a sep- you did not report as priority cla 	aration agreement or divorce that nims	6g.	\$	0.00	

Official Form 106 E/F

Debtor 1 _	otor1 Marina Sferlazza		Case number (if known)		8-19-78530	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	9,127.00	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	9,127.00	

Fill in this infor	mation to identify your	case:		
Debtor 1	Marina Sferlaz			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK	
Case number	8-19-78530			
(if known)				Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Chrysler Capital Po Box 961212 Fort Worth, TX 76161	Lease for a 2014 Audi

Official Form 106H Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. It beople are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the ill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Addition	
Debtor 2 (Spouse if, filing) Prist Name Middle Name Last Name Last Name Last Name United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK Case number 8-19-78530 Check ament Official Form 106H Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. Beople are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the lill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Addition orur name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territe Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List tin line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Sc Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or out Column 2. Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code	
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Case number 8-19-78530	
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Name, Number, Street, City, State and ZIP Code Check all schedules that apply:	nedule D (Official
	u owe the debt
3.1 Joseph Sferlazza	
J2 Nothingate Clescent	
Melville, NY 11747 Schedule G	_
Selene Finance	
3.2 Joseph Sferlazza Schedule D, line 2.1	
□ Schedule E/F, line	
☐ Schedule G	_
BOD of Northgate	

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Fill in this informat	tion to identify your c	ase:		
Debtor 1	Marina Sfe	erlazza		
Debtor 2 (Spouse, if filing)				
United States Ban	kruptcy Court for the	: EASTERN DISTRICT	Γ OF NEW YORK	
Case number	8-19-78530			Check if this is:
(If known)			_	☐ An amended filing
				☐ A supplement showing postpetition chapte 13 income as of the following date:
Official Fo	<u>rm 106l</u>			MM / DD/ YYYY
Schedule	I: Your Inc	ome		12/
Be as complete as supplying correct spouse. If you are	information. If you separated and you	are married and not fili or spouse is not filing w	ing jointly, and your spouse is livir vith you, do not include information	nd Debtor 2), both are equally responsible for ig with you, include information about your in about your spouse. If more space is needed
Be as complete al supplying correct spouse. If you are attach a separate Part 1: Des	information. If you e separated and you sheet to this form. cribe Employment	are married and not fili or spouse is not filing w	ing jointly, and your spouse is livir vith you, do not include information	g with you, include information about your
Be as complete a supplying correct spouse. If you are attach a separate	information. If you eseparated and you sheet to this form. Ecribe Employment employment	are married and not fili or spouse is not filing w	ing jointly, and your spouse is livir vith you, do not include information	ng with you, include information about your n about your spouse. If more space is needed
Be as complete all supplying correct spouse. If you are attach a separate Part 1: Des 1. Fill in your entromation. If you have meaning the supplying the	e information. If you as separated and you sheet to this form. Incribe Employment employment amployment amplo	are married and not fili ir spouse is not filing w On the top of any addit	ing jointly, and your spouse is livir vith you, do not include information ional pages, write your name and o	ng with you, include information about your nabout your nabout your spouse. If more space is needed case number (if known). Answer every question
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Be as complete all supplying correct spouse. If you are attach a separate Part 1: Des 1. Fill in your e information. If you have mattach a sepainformation a employers.	e information. If you e separated and you sheet to this form. Incribe Employment employment Incre than one job, arate page with about additional time, seasonal, or	are married and not filing won the top of any addit	ing jointly, and your spouse is livir ith you, do not include information ional pages, write your name and other pages. Debtor 1 Employed Not employed	pg with you, include information about your about your about your spouse. If more space is needed case number (if known). Answer every question Debtor 2 or non-filing spouse
Be as complete at supplying correct spouse. If you are attach a separate Part 1: Des 1. Fill in your experiments information. If you have mattach a separate information a employers. Include part-self-employers.	e information. If you e separated and you sheet to this form. Incribe Employment employ	are married and not filing won the top of any addit Employment status Occupation	Debtor 1 Employed Not employed Sales	pg with you, include information about your about your about your spouse. If more space is needed case number (if known). Answer every question Debtor 2 or non-filing spouse
Be as complete at supplying correct spouse. If you are attach a separate Part 1: Des 1. Fill in your experiments information. If you have mattach a separate information a employers. Include part-self-employers.	e information. If you e separated and you sheet to this form. Incribe Employment employ	are married and not filing won the top of any addit Employment status Occupation Employer's name	Debtor 1 Employed Not employed Sales	pg with you, include information about your about your about your spouse. If more space is needed case number (if known). Answer every question Debtor 2 or non-filing spouse

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

			non	-tiling spouse
2.	\$	4,196.00	\$	0.00
3.	+\$	0.00	+\$	0.00
4.	\$	4,196.00	\$	0.00

For Debtor 2 or

For Debtor 1

Official Form 106I Schedule I: Your Income page 1

Debt	or1 <u>Marina Sferlazza</u>		Case	number (<i>if known</i>)	8-19-78	8530
			For	Debtor 1	For Deb	tor 2 or ng spouse
	Copy line 4 here	4.	\$	4,196.00	\$	0.00
5.	List all payroll deductions:					
<i>o.</i>	5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.+	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	846.00 0.00 0.00 0.00 110.00 0.00 0.00 0.00	\$ \$ \$ \$ + \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	956.00	\$	0.00
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,240.00	\$	0.00
8.	List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify:	8a. 8b. 8c. 8d. 8e. 8f. 8g. 8h.+	\$\$ \$\$\$ \$\$\$\$	0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10. \$	3,	240.00 + \$_	0.0	00 = \$ 3,240.00
11.	State all other regular contributions to the expenses that you list in <i>Schedule</i> Include contributions from an unmarried partner, members of your household, your other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not a Specify:	depen		•	ed in <i>Sche</i>	dule J.
12.	Add the amount in the last column of line 10 to the amount in line 11. The rest Write that amount on the Summary of Schedules and Statistical Summary of Certain applies				, if it	12. \$ 3,240.00
13.	Do you expect an increase or decrease within the year after you file this form?	?				Combined monthly income
	■ No.					
	Yes. Explain:					

Official Form 106l Schedule I: Your Income page 2

	in this information to identify				
FIII	in this information to identify your case:				
Deb	Marina Sferlazza		Ch	eck if this is: An amended filing	
	otor 2				ving postpetition chapter
(Sp	ouse, if filing)			13 expenses as of	the following date:
Uni	ted States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YO	ORK		MM / DD / YYYY	
1	se number 8-19-78530 (nown)				
0	fficial Form 106J				
S	chedule J: Your Expenses				12/1
Be info nu	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this funder (if known). Answer every question.				
1.	Is this a joint case?				
	No. Go to line 2.☐ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate Househo	old of De	ebtor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	502.6			- 3	□ No
	Do not state the dependents names.				□ No
					□ No
					☐ Yes
					□ No
					☐ Yes
					□ No
2	Do your expenses include —				☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes				
Pai	rt 2: Estimate Your Ongoing Monthly Expenses				
exp	timate your expenses as of your bankruptcy filing date unless your expenses as of a date after the bankruptcy is filed. If this is a suppoplicable date.				
the	clude expenses paid for with non-cash government assistance if a value of such assistance and have included it on Schedule I: Y			Your exp	enses
,01					
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4.	\$	900.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b.		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c.		0.00
_	4d. Homeowner's association or condominium dues	ma aquitulaana	4d.	\$ c	0.00

Debtor 1 Marina Sferlazza	Cas	se number (if known)	8-19-78530
6. Utilities:			
6a. Electricity, heat, natural gas		6a. \$	325.00
6b. Water, sewer, garbage collection		6b. \$	0.00
6c. Telephone, cell phone, Internet, sate	allita, and cable convices	6c. \$	220.00
	ellite, and cable services		
6d. Other. Specify: Cable TV		6d. \$	175.00
7. Food and housekeeping supplies		7. \$	600.00
8. Childcare and children's education cos	ts	8. \$	0.00
9. Clothing, laundry, and dry cleaning		9. \$	25.00
10. Personal care products and services		10. \$	25.00
11. Medical and dental expenses		11. \$	45.00
Transportation. Include gas, maintenance	e, bus or train fare.	40 6	200 00
Do not include car payments.		12. \$	300.00
13. Entertainment, clubs, recreation, newsp		13. \$	50.00
14. Charitable contributions and religious of	donations	14. \$	0.00
15. Insurance.			
Do not include insurance deducted from yo	our pay or included in lines 4 or 20.		
15a. Life insurance		15a. \$	0.00
15b. Health insurance		15b. \$	0.00
15c. Vehicle insurance		15c. \$	225.00
15d. Other insurance. Specify:		15d. \$	0.00
16. Taxes. Do not include taxes deducted from	n your pay or included in lines 4 or 20.		
Specify:	, , ,	16. \$	0.00
17. Installment or lease payments:			
17a. Car payments for Vehicle 1		17a. \$	345.00
17b. Car payments for Vehicle 2		17b. \$	0.00
		17c. \$	0.00
17d. Other. Specify:		17d. \$	0.00
18. Your payments of alimony, maintenance	e, and support that you did not report as		
	dule I, Your Income (Official Form 106I).	18. \$	0.00
19. Other payments you make to support of		\$	0.00
Specify:	·	19.	
20. Other real property expenses not include	ded in lines 4 or 5 of this form or on Schedul	e I: Your Income.	
20a. Mortgages on other property		20a. \$	0.00
20b. Real estate taxes		20b. \$	0.00
20c. Property, homeowner's, or renter's i	nsurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep ex		20d. \$	0.00
20e. Homeowner's association or condor		20e. \$	0.00
21. Other: Specify:		21. +\$	0.00
			3.33
22. Calculate your monthly expenses			
22a. Add lines 4 through 21.		\$	3,235.00
22b. Copy line 22 (monthly expenses for D	Debtor 2), if any, from Official Form 106J-2	\$	
22c. Add line 22a and 22b. The result is y	our monthly expenses.	\$	3,235.00
•	, ,		,
23. Calculate your monthly net income.		00 4	
23a. Copy line 12 (your combined month		23a. \$	3,240.00
23b. Copy your monthly expenses from li	ine 22c above.	23b\$	3,235.00
00 - 0 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	and the second s		
23c. Subtract your monthly expenses from		23c. \$	5.00
The result is your monthly net incom	I C .	250.	3.00
	in your expenses within the year after you fi your car loan within the year or do you expect your more		ease or decrease because of a
☐ Yes. Explain here:			
<u> </u>			

Fill in this	s information to identify you	r case:			
Debtor 1	Marina Sferla	azza			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the	EASTERN DISTRICT	OF NEW YORK		
Case num (if known)	aber <u>8-19-78530</u>				☐ Check if this is an amended filing
	Form 106Dec	on Individua	l Dobtorio Sob	adulaa	
Decia	aration About	an individua	I Debtor's Sch	iedules	12/15
years, or L	Sign Below	1319, and 3371.			
Did y	you pay or agree to pay son	neone who is NOT an atte	orney to help you fill out bar	nkruptcy forms?	
	No				
	Yes. Name of person				kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	r penalty of perjury, I declar hey are true and correct.	e that I have read the su	mmary and schedules filed	with this declarati	on and
х			X		
	Iarina Sferlazza Signature of Debtor 1		Signature of De	ebtor 2	
D	Date December 16, 20	19	Date		

Official Form 106Dec

Fill i	n this info	ormation to identify you	r case:				
Debt	tor 1	Marina Sferla	zza				
		First Name	Middle Name		Last Name		
Debt (Spou	tor 2 se if, filing)	First Name	Middle Name		Last Name		
` '	. 0,			NE 11514/			
Unite	ed States I	Bankruptcy Court for the:	EASTERN DISTRICT C)F NEW	YORK		
Case	e number	8-19-78530					
(if kno	wn)					-	Check if this is an
							amended filing
Off	icial F	<u>form 107</u>					
Sta	temer	nt of Financial	Affairs for Indiv	idual	s Filing for B	ankruptcy	4/19
nfori	mation. If per (if kno	f more space is needed, wn). Answer every que	attach a separate sheet to	o this fo	rm. On the top of any	equally responsible for su vadditional pages, write yo	
		our current marital statu					
-	_						
	Marri						
	□ Not n	narried					
2. I	During the	e last 3 years, have you	lived anywhere other than	n where	you live now?		
I	■ No						
l	☐ Yes.	List all of the places you I	ived in the last 3 years. Do	not inclu	de where you live now	'.	
	Debtor 1	Prior Address:	Dates Debtor lived there	1	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
						ity property state or territo co, Texas, Washington and	
	■ No						
	☐ Yes.	Make sure you fill out Sch	nedule H: Your Codebtors (Official F	Form 106H).		
Part	2 Exp	lain the Sources of You	r Income				
I	Fill in the t	otal amount of income yo	nployment or from operat u received from all jobs and have income that you rece	d all busi	nesses, including part-		endar years?
	□ No						
	_	Fill in the details.					
	— 103.	i iii iii tiic detaiis.					
			Debtor 1			Debtor 2	
			Sources of income Check all that apply.	(be	oss income fore deductions and lusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		1 of current year until iled for bankruptcy:	■ Wages, commissions, bonuses, tips		\$47,210.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business			☐ Operating a business	
			- Operating a business			, 5	

Official Form 107

Deb	otor 1 Ma	rina Sfe	erlazza		(case numbe	r (if known)	8-19-78	530
				Debtor 1		Debto	or 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Source	ces of inco		Gross income (before deductions and exclusions)
	last calen nuary 1 to	dar year: December	31, 2018)	■ Wages, commissions, bonuses, tips	\$49,200.0		ages, comi ses, tips	missions,	
				☐ Operating a business		□Ор	erating a l	business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$49,000.0		ages, comi ses, tips	missions,	
				☐ Operating a business		□Ор	erating a l	business	
	winnings. List each s	If you are fili	ing a joint cas	pensions; rental income; inter- e and you have income that y ome from each source separat	ou received together, list	it only once	under De	ebtor 1.	d gambling and lottery
				Debtor 1		Debto	or 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Source	ces of ince		Gross income (before deductions and exclusions)
Par	t 3: List	t Certain Pa	yments You	Made Before You Filed for E	Bankruptcy				
6.	□ No.	Neither De individual puring the No. Yes * Subject Debtor 1 of	90 days before 30 days before 40 days before 40 days before 50 day	each creditor to whom you paid editor. Do not include paymen payments to an attorney for the con 4/01/22 and every 3 years r both have primarily consu- tre you filed for bankruptcy, did	mer debts. Consumer ded purpose." If you pay any creditor a find a total of \$6,825* or mosts for domestic support on the bankruptcy case. If after that for cases filed the mer debts. If you pay any creditor a find a total of \$600 or more	otal of \$6,8 re in one or bligations, s on or after otal of \$600	25* or more paysuch as chithe date of or more?	re? ments and the support a fadjustment.	ne total amount you nd alimony. Also, do
	Creditor'	's Name and	d Address	Dates of payme	nt Total amount	Amoi	ınt you	Was this n	payment for
	2.24.131	all		zatoo of paymor	paid		till owe	p	,

Case number (if known) 8-19-78530

7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 17 alimony.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partners of their voting	erships of which yo g securities; and ar	u are a general ny managing age	partner; corporations ent, including one for
	■ No					
	Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for th	nis payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi		•		ccount of a deb	ot that benefited an
	■ No					
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	
Pa	rt 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.					
	□ No■ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	case
	BOD of Northgate v Marina Sferlazza	Foreclosure	Suffolk Supi	reme	☐ Pending ☐ On appeal ☐ Concluded	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11.		rty repossessed, f	foreclosed, garnis	hed, attached,	seized, or levied?
	Yes. Fill in the information below.	Describe the Bossester		Dete		Walana at the
	Creditor Name and Address	Describe the Property Explain what happened	ı	Date		Value of the property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca	tcy, did any creditor, incl		nancial institution	, set off any am	nounts from your
	■ No □ Yes. Fill in the details.	,				
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an		rty in the possess	ion of an assigne	e for the benefi	t of creditors, a
	■ No □ Yes					

Debtor 1 Marina Sferlazza

Dei	otori <u>Marina Sieriazza</u>	Case number	(If known) 8-19-785	30
Pai	rt 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or cor	otcy, did you give any gifts or contributions with a total	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value
Pai	t 6: List Certain Losses			
15.	or gambling?	cy or since you filed for bankruptcy, did you lose any	thing because of the	it, fire, other disaster,
	■ No □ Yes. Fill in the details.			
	how the loss occurred	Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	rt 7: List Certain Payments or Transfers			
16.	Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or pr	ccy, did you or anyone else acting on your behalf pay of eparing a bankruptcy petition? eparers, or credit counseling agencies for services require		rty to anyone you
	□ No ■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	John Weber & Associates PC 400 West Main Street Suite 206 Babylon, NY 11702 jweberatty@aol.com	Attorney Fees	December 2019	\$1,750.00
17.		ccy, did you or anyone else acting on your behalf pay cors or to make payments to your creditors? ou listed on line 16.	or transfer any prope	rty to anyone who
	■ No			
	Yes. Fill in the details. Person Who Was Paid	Description and value of any property	Date payment	Amount of
	Address	transferred	or transfer was made	payment

Debtor 1 Marina Sferlazza

Case number (*if known*) 8-19-78530

18.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your bu Include both outright transfers and transfers mainclude gifts and transfers that you have already No Yes. Fill in the details.	siness or financial affa de as security (such as t	airs? the granting of a se		
	Person Who Received Transfer Address Person's relationship to you	Description and v		Describe any property or payments received or debts paid in exchange	Date transfer was made
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot No ☐ Yes. Fill in the details.		y property to a se	lf-settled trust or similar device	of which you are a
	Name of trust	Description and v	alue of the proper	rty transferred	Date Transfer was made
Par	List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and Stora	age Units	
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc No Yes. Fill in the details.	other financial accou	nts; certificates of		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yearsh, or other valuables?	ear before you filed for	bankruptcy, any	safe deposit box or other depos	sitory for securities,
	Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?
22.	Have you stored property in a storage unit or	r place other than your	home within 1 ye	ar before you filed for bankrupt	cy?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control f	or Someone Else			
23.	Do you hold or control any property that son for someone.	neone else owns? Inclu	ude any property y	you borrowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		escribe the property	Value
Par	t 10: Give Details About Environmental Info	rmation			
For	the purpose of Part 10, the following definitio	ns apply:			

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5 toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 Marina Sferlazza

Case number (*if known*) 8-19-78530

	regulations controlling the cleanup of these	substances, wastes, or material.		
	Site means any location, facility, or property to own, operate, or utilize it, including dispos	•	aw, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an envir hazardous material, pollutant, contaminant,		waste, hazardous substance, toxic s	substance,
Rep	ort all notices, releases, and proceedings tha	t you know about, regardless of when	they occurred.	
24.	Has any governmental unit notified you that	you may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of a	any release of hazardous material?		
	■ No			
	Yes. Fill in the details.			5
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adm	inistrative proceeding under any envi	ronmental law? Include settlements a	and orders.
	■ No			
	Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City,	Nature of the case	Status of the case
		State and ZIP Code)		
Par	t 11: Give Details About Your Business or C	Connections to Any Business		
27.	Within 4 years before you filed for bankrupto	ey, did you own a business or have an	y of the following connections to any	/ business?
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability compa	any (LLC) or limited liability partnershi	ip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing exe	cutive of a corporation		
	☐ An owner of at least 5% of the voting	or equity securities of a corporation		
	■ No. None of the above applies. Go to Pa	art 12.		
	☐ Yes. Check all that apply above and fill i	in the details below for each business	i.	
	Business Name Address	Describe the nature of the business	Employer Identification numbe Do not include Social Security	
		Name of accountant or bookkeeper	Dates business existed	number of frie.
28.	Within 2 years before you filed for bankrupto institutions, creditors, or other parties.	y, did you give a financial statement t	o anyone about your business? Inclu	ude all financial
	■ No			
	☐ Yes. Fill in the details below.			
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Debtor 1 Marina Sferlazza		Case number (if known)	8-19-78530
	naking a false statement, concealing property, o es up to \$250,000, or imprisonment for up to 20 y	•	property by fraud in connection
Marina Sferlazza Signature of Debtor 1	Signature of Debtor 2		
Date December 16, 2019	Date		
Did you attach additional pages to <i>You</i> . ■ No	Statement of Financial Affairs for Individuals Fi	ling for Bankruptcy (Official Form 107)?
☐Yes			
Did you pay or agree to pay someone w ■ No	ho is not an attorney to help you fill out bankrup	otcy forms?	
☐ Yes. Name of Person	Attach the Bankruptcy Petition Preparer's Notice, De	eclaration, and Signatu	re (Official Form 119).

Debtor 1	Marina Sfer	lazza		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
Case number _	8-19-78530			
(if known)	0-19-70330			☐ Check if this is ar

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below

Identify the cre	ditor and the property that is collateral	What do you intend to do with the property that secures a debt?	t Did you claim the property as exempt on Schedule C?
Creditor's BC name: Description of property securing debt:	32 Northgate Crescent Melville, NY 11747 Suffolk County Property in Foreclosure. Subject to Liens in excess of \$800,000.00	 ☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: Retain Lien	□ No ■ Yes
Creditor's Se	elene Finance	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt:	32 Northgate Crescent Melville, NY 11747 Suffolk County Property in Foreclosure. Subject to Liens in excess of \$800,000.00	☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: Possible Loan Modification	■ Yes

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

Debto	or 1 M	arina	Sferlazza	a			Case number (if known)	8-19-78530
Dosc	ribe voi	ur unav	nired nersons	al property leas	205			Will the lease be assumed?
Desc	ine you	ui uiiex	pireu personi	al property leas	363			will the lease be assumed:
Lesso	or's nam	ie:	Chrysle	r Capital				□ No
								Yes
Desc Prope		f leased	Lease fo	or a 2014 <i>I</i>	Audi			
Part 3	Si Sig	gn Belov	N					
prope			jury, I declare ect to an une		dicated my intention		ty of my estate that se	cures a debt and any personal
X _						Χ		
]	Marina	a Sfer	rlazza			Signature of	f Debtor 2	
;	Signatur	re of Del	otor 1					
ı	Date	Dece	mber 16,	2019	_	Date		

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

In re	Marina Sferlazza		Case No.	8-19-78530	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENS	SATION OF ATTORN	EY FOR DE	CBTOR(S)	
C	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) ompensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy, or	agreed to be paid	to me, for services rende	red or to
	For legal services, I have agreed to accept		\$	1,750.00	
	Prior to the filing of this statement I have received		\$	1,750.00	
	Balance Due		\$	0.00	
2. \$	of the filing fee has been paid.				
3. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. I	I have not agreed to share the above-disclosed compen	nsation with any other person unl	less they are meml	pers and associates of my	law firm.
[I have agreed to share the above-disclosed compensati copy of the agreement, together with a list of the name				irm. A
6. I	n return for the above-disclosed fee, I have agreed to reno	der legal service for all aspects o	f the bankruptcy c	ase, including:	
b c. d	Analysis of the debtor's financial situation, and rendering Preparation and filing of any petition, schedules, statent Representation of the debtor at the meeting of creditors. Representation of the debtor in adversary proceedings as [Other provisions as needed]	nent of affairs and plan which mass and confirmation hearing, and a	ay be required; any adjourned hear		cy;
7. B	y agreement with the debtor(s), the above-disclosed fee d	loes not include the following se	rvice:		
		CERTIFICATION			
	certify that the foregoing is a complete statement of any a nkruptcy proceeding.	agreement or arrangement for pa	yment to me for re	epresentation of the debto	or(s) in
De	cember 16, 2019				
Da	· · · · · · · · · · · · · · · · · · ·	John Weber, Esq.	•		-
		Signature of Attorney John Weber & Ass	sociates PC		
		400 West Main St			
		Suite 206	12		
		Babylon, NY 1170 631 321 6065 Fa:	x: 631 321-60	67	
		jweberatty@aol.o			_
		rume of the firm			

United States Bankruptcy Court Eastern District of New York

In re	Marina Sferlazza			8-19-78530
		Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date: December 16, 2019

Marina Sferlazza

Signature of Debtor

Date: December 16, 2019

Signature of Attorney
John Weber, Esq.
John Weber & Associates PC
400 West Main Street
Suite 206
Babylon, NY 11702

Babylon, NY 11702 631 321 6065 Fax: 631 321-6067

USBC-44 Rev. 9/17/98

BOD of Northgate c/o Schneider/Buchell 666 Old Country Road Garden City, NY 11530

Cap1/1&t Po Box 30253 Salt Lake City, UT 84130

Cap1/saks 3455 Hwy 80 West Jackson, MS 39209

Chrysler Capital Po Box 961212 Fort Worth, TX 76161

Credence Resource Mana Po Box 2300 Southgate, MI 48195

Credit Coll Po Box 607 Norwood, MA 02062

Credit One Bank Na Po Box 98872 Las Vegas, NV 89193

Jefferson Capital Syst 16 Mcleland Rd Saint Cloud, MN 56303

National Grid POB 11741 Newark, NJ 07101

NYS Dept of Tax & Finance POB 5300 Albany, NY 12205

PSEGLI 15 Park Dr Special Collections Melville, NY 11747 Selene Finance 9990 Richmond Suite 400 South Houston, TX 77242

Syncb/bp C/o Po Box 965024 Orlando, FL 32896

The Bureaus Inc 650 Dundee Road Northbrook, IL 60062

Woods Oviatt Gilman 700 Crossroads Building 2 State Street Rochester, NY 14614

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

CASE NO.:. 8-19-78530

		-2(b), the debtor (or any other petitioner) hereby makes the following disclosure knowledge, information and belief:
was pending at any time spouses or ex-spouses; (ii partnership and one or make, or within 180 days	within eight years before ii) are affiliates, as define ore of its general partners	or purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are doin 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a s; (vi) are partnerships which share one or more common general partners; or (vii) either of the Related Cases had, an interest in property that was or is included in the a).]
■ NO RELATED CASE	E IS PENDING OR HAS	BEEN PENDING AT ANY TIME.
☐ THE FOLLOWING F	RELATED CASE(S) IS F	PENDING OR HAS BEEN PENDING:
1. CASE NO.:	JUDGE:	DISTRICT/DIVISION:
CASE STILL PENDING	(Y/N):	[If closed] Date of closing:
CURRENT STATUS O	F RELATED CASE:	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
		(Refer to NOTE above):
	TED IN DEBTOR'S SCH LATED CASE:	EDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE:	DISTRICT/DIVISION:
CASE STILL PENDING	(Y/N):	[If closed] Date of closing:
CURRENT STATUS O	F RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH O	CASES ARE RELATED	(Refer to NOTE above):
	TED IN DEBTOR'S SCH LATED CASE:	EDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE:	DISTRICT/DIVISION:
CASE STILL PENDING	(Y/N):	[If closed] Date of closing:

 $\mathbf{DEBTOR}(\mathbf{S})$: Marina Sferlazza

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE: (Discharged	/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE ab	
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REASCHEDULE "A" OF RELATED CASE:	AL PROPERTY") WHICH WAS ALSO LISTED IN
<i>NOTE:</i> Pursuant to 11 U.S.C. § 109(g), certain individuals who have be eligible to be debtors. Such an individual will be required to file a	
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNEY,	AS APPLICABLE:
I am admitted to practice in the Eastern District of New York (Y/N):	<u>Y</u>
CERTIFICATION (to be signed by pro se debtor/petitioner or debtor. I certify under penalty of perjury that the within bankruptcy case is not as indicated elsewhere on this form.	
John Weber, Esq. Signature of Debtor's Attorney John Weber & Associates PC 400 West Main Street	Signature of Pro Se Debtor/Petitioner
Suite 206 Babylon, NY 11702 631 321 6065 Fax:631 321-6067	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
Failure to fully and truthfully provide all information required by the	Area Code and Telephone Number E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any

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other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

NOTE: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17

	STATES BANKRUPTCY COURT N DISTRICT OF NEW YORK	
	X	Chapter ⁷
IN RE:	Marina Sferlazza	Case No.: 8-19-78530
	Debtor(s)	STATEMENT PURSUANT TO LOCAL RULE 2017

I, John Weber, Esq., an attorney admitted to practice in this Court, state:

- 1. That I am the attorney for the above-named debtor(s) and am fully familiar with the facts herein.
- 2. That prior to the filing of the petition herein, my firm rendered the following services to the above-named debtor(s):

Date\Time	Services
12/12/19 .75 Hours 12/13/19 .5 Hours	Initial interview, analysis of financial condition, etc.
12/13/19 .3 Hours	condition, etc.
12/16/19 2.00 Hours	Preparation and review of Bankruptcy petition

- 3. That my firm will also represent the debtor(s) at the first meeting of creditors.
- 4. That all services rendered prior to the filing of the petition herein were rendered by my firm.
- 5. That my usual rate of compensation of bankruptcy matters of this type is \$ 1,750.00 .

Dated: December 16, 2019

/s/ John Weber

John Weber, Esq.

Attorney for debtor(s)

John Weber & Associates PC 400 West Main Street Suite 206 Babylon, NY 11702 631 321 6065 Fax:631 321-6067 jweberatty@aol.com